STATE OF NEW HAMPSHIRE

2018 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

PLEASE PRINT

I. Name of Lobbyist(s) David Co	Ilins, Gina Powers		
II. Name of lobbyist's partnershi	p, firm or corporation, if a	ny:	
RYP Granite Strategies, LLC			
(Name of partners)	nip, firm or corporation)	•	
One Capital Plaza	Concord	NH	03301
Business Address: (Street)	(Town/City)	(State)	(Zip Code)
(603) 226-2600	(603) 226-2700	e-mail	dgc@rypgranite.com
(Telephone)	(Fax)	
III. This statement covers: (Choo reportable expense transactions	which are not attributable	to any one client).	
All reportable transactions occur	urring in the months prior to	the reporting date relative	e to the following client:
Vail Resorts	COV.	- Line Care Day and a Parana	
OR (Full Name	of Client as it appears on the Le	obbyist Registration Form)	
All reportable transactions by the unrelated to any particular client.	ne lobbyist (including the lob	obyist's family), or the lob	bying firm listed below which are
IV. Date of Report April 25, 2 Reports cover: activity from date	2018 Of registration to 3/31/18	July 25, 2018 & activity from 4/1/18 to 6	
	1, 2018	January 30, 201 activity from 10/1/18 to	
V. There have been no fees re If this box is checked, complete jus Concord, NH 03301.			
VI. Check if additional reports a	re attached:		
☑ If you have received fees or m	ade expenditures, you must	file Addendum A- Fees a	and Expenses
If you have paid an honorarium Expense Reimbursement	n or reimbursed expenses, ye	ou must file Addendum I	3- Report of Honorariums or
☐ If you, your firm, or your fami	ly has made political contrib	outions, you must file Add	lendum C- Political Contributions
Sworn Statement/Affirmation by Thave read R8A 15, RSA 15-D/R and complete to the best of my kne	\$A 14-¢ and RSA 664 and 1	nereby swear or affirm tha July 25, 2018	t the foregoing information is true
(Signature of lobbyist)			(Date)
David C. Callina			
David G. Collins (Brint Name of Johnvist)			

PLEASE PRINT

STATE OF NEW HAMPSHIRE



Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

RECEIVED

JUL 25 2018

NEW HAMPSHIRE DEPARTMENT OF STATE

	DEPARTMENT OF
I. Name of Lobbyist(s) David Collins; Gina Powers	
II. Name of lobbyist's partnership, firm or corporation, if any:	
Rath Young and Pignatelli, P.C.	
(Name of partnership, firm or corporation)	
III. Name of Client Vail Resorts	Date July 25, 2018
 IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The grareduced by any expenses: Total of all fees received in this reporting period Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar ye Total of all fees received to date (Add lines a and b) Indicate the amount of any such fees that are due, but have not yet been paid 	t relations, or public relations services oss fee amount reported shall not be a) \$0 b) \$0
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to repfees. Separate reports are to be filed for expenditures made relative to each the lobbyist(s)/firm that are unrelated to any one client a separate report of Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office exindividual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of lebeing lobbied, purchase of a ceremonial object given to a person being lobbie (c) an itemized statement of each individual expenditure made during this reportance and purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greate restaurant expenses for a legislative reception). Expenses for honorariums contributions will be reported on separate addendums and should not be reported. a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying. b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	client and if expenditures are made by may be filed for the lobbyist(s)/firm. e aggregate total of all expenses paid xpenses; (b) the aggregate total of all ele: meals purchased during a business ess than \$10 that is given to the person ed with a value of \$25.00 or less); and orting period of greater than \$25.00 for ue of greater than \$25, purchase of a er than \$25, but not greater than \$50, i, expense reimbursement, or political ted on Addendum A. a) \$15,000.00
c) Total of all itemized expenditures reported in detail in section VI.	c) \$0

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$15,000.00
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$0
f) Total of all expenses year to date	f) \$15,000.00
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from period, including by whom paid or to whom charged.	lobbying fees during this reporting
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
Sworn Statement/Affirmation by Lobbyist Lhave read RSA 15, RSA 15-B and RSA 664 and hereby swear or affir is true and complete to the best of my knowledge and belief.	
(Signature of lobbyist)	(Date)
David G. Collins	(2)

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